	CLAIMS ONLY		Application Number D9/T88 496		Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	1						51						
2	1	1					52						
3	1	1					53						
4	1						54						
5		1					55						
6	1						56						
7		1					57						
8		1					58						
9		1					59						
10	1						60						
11	1						61						
12	1						62						
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37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep	7						Total Indep						
Total Depend	5						Total Depend						
Total Claims	12						Total Claims						

New